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CONFIRMATION NO. 7190

|  |   |                                   |   |                                       |                                |
|--|---|-----------------------------------|---|---------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/530,683   | <b>FILING OR 371(c) DATE</b><br>09/02/2005<br><b>RULE</b>   | <b>CLASS</b><br>606               | <b>GROUP ART UNIT</b><br>3732   | <b>ATTORNEY DOCKET NO.</b><br>1811-64 |                                |
| <b>APPLICANTS</b><br>Frederic Impellizzeri, Salon de Provence, FRANCE;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/FR03/02968 10/08/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>FRANCE 0212534 10/09/2002<br><div style="text-align: center;"><b>** SMALL ENTITY **</b></div> |   |                                   |   |                                       |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature _____ Initials _____   |   | <b>STATE OR COUNTRY</b><br>FRANCE | <b>SHEETS DRAWING</b><br>5  | <b>TOTAL CLAIMS</b><br>9              | <b>INDEPENDENT CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>24106  |   |                                   |   |                                       |                                |
| <b>TITLE</b><br>Self-locking osteosynthesis device   |   |                                   |   |                                       |                                |
| <b>FILING FEE RECEIVED</b><br>645  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                   | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                       |                                |